

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Nora Cruz Molina

Participant's Address:

P.O. Box 2795 Arecibo P.R. 00613-2795

Participant's Email Address:

nora.cruz.molina@gmail.com

Name of Counsel:

Nora Cruz Molina

Address of Counsel:

P.O. Box 2795 Arecibo P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

\_\_\_\_\_

Nature of Claim:

\_\_\_\_\_

By:

Cruz  
Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

5/ agosto/2021

Date

RECEIVED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
U.S. DISTRICT COURT  
SAN JUAN, PR  
201 AUG 17 PM 6:40

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT / GENERAL COUNSEL.

PR 1845 SRF 55176 PackID: 177839 MMLID: 117156-P SVC: MML-PC  
CRUZ MOLINA, NORA  
PO BOX 2795  
ARECIBO PR 00613

0061382795 B014

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: A. Francisco Jimenez Diaz

Participant's Address: \_\_\_\_\_

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795, Urecibo P.R. 00613-2795

Email Address of Counsel: nora-cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature  
Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

8-9-2021

Date

2021 AUG 17 PM 6:40

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CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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**LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT/ GENERAL COUNSEL.**

PR 1845 SRF 55176 PACKID: 68618 MMLID: 178135-NP SVC: MML-PC  
JIMENEZ ALVAREZ, FRANCISCO J  
NORA CRUZ MOLINA  
DESPACHO LEGAL LCOLA, NORA CRUZ MOLINA  
P.O. BOX 2795  
ARECIBO PR 00613-2795

0061382795 8014

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Ottman R. Martinez Martinez

Participant's Address:

P.O. Box 1275 Trujillo Alto P.R. 00413-2795

Participant's Email Address:

Nora Crux Molina

Name of Counsel:

P.O. Box 2795 Arecibo, P.R. 00413-2795

Address of Counsel:

nora.crux.molina@gmail.com

Email Address of Counsel:

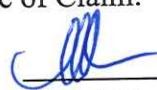
2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

24833

Nature of Claim:

By:

  
Signature

Nora Crux Molina

Print Name

Counsel

Title (if Participant is not an individual)

8-9-2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Atman R. Martinez Martinez

Participant's Address: P.O. Box 1075, Trujillo Alto PR. 00977

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Chux Molina

Address of Counsel: P.D. Box 2795 Caguabo, P.R. 00913-2795

Email Address of Counsel: nora.chux.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Chux Molina

Print Name

Counsel

Title (if Participant is not an individual)

8-9-2021

Date

2021 AUG 17 PM 6:40

RECEIVED  
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CLERK'S OFFICE  
SAN JUAN, PUERTO RICO

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

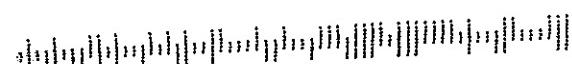
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New York, NY 10163-4850

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**LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT/GENERAL COUNSEL.**

PR 1845 SRF 55176 PACKID: 191123 MMLID: 1500725-NP SVC: MML-PC  
MARTINEZ MARTINEZ, OTTMAN R.  
NORA CRUZ MOLINA  
ATTORNEY  
DESPACHO LEGAL LCDA.  
P.O. BOX 2795  
RECIBO PR 00613-2795

0061332795 0014



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PO Box 4850  
New York, NY 10163-4850

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**LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT/GENERAL COUNSEL.**

PR 1845 SRF 55176 PACKID: 191127 MMLID: 1420481-P SVC: MML-PC  
MARTÍNEZ MARTÍNEZ, OTTMAN R.  
NORA CRUZ MOLINA  
PO BOX 2795  
ARECIBO PR 00613-2795

0061382755 EC014



Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Otman Martinez Martinez

Participant's Address: \_\_\_\_\_

Participant's Email Address: P.O Box 1275, Trujillo Alto, PR 00977

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O Box 2795 Arecibo P.R. 00613-2795

Email Address of Counsel: nora.cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

8-9-2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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**LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT/GENERAL COUNSEL.**

PR 1845 SRF 55176 PACKID: 191125 MMLID: 310253-P SVC: MML-PC  
MARTINEZ MARTINEZ, OTTMAN R.  
LCDA. NORA CRUZ MOLINA  
PO BOX 2795  
ARECIBO PR 00613-2795

0061382795 ED014



Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Olivero Roman Alvarado

Participant's Address: HC # BOX 611608, Camuy P.R. 00627

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: Po Box 2795 Dorrico, P.R. 00613-2795

Email Address of Counsel: nora.cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 153720

Nature of Claim: \_\_\_\_\_

By: C

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

Sept 0 - 2021

Date

2021 AUG 17 PM 6:37

CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Nora Cruz Molina

Participant's Address: Hacienda Box 6140B, Camuy P.R. 00627

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz molina

Address of Counsel: P.O. Box 2795 Arecibo, PR 00613-2795

Email Address of Counsel: nora.cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: Nora Cruz Molina

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

5-Agosto-2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Yadira Ramos Cruz

Participant's Address: Hc 02 Box 5727 Lares, PR 00619

Participant's Email Address: nora.cruz.molina@gmail.com

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Arecibo P.R. 00413-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: C-94107

Nature of Claim: Discrimen por razón de sexo, Represalias

By: Nora Cruz

Signature

Nora Cruz

Print Name

Counsel

Title (if Participant is not an individual)

2-Augusto-2021

Date

RECEIVED AND FILED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
2021 AUG 17 PM 6:36

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Yadira Ramos Cruz

Participant's Address: 1002 BUZON 5727 Hato PR. 00649

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Arecibo, P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: Discrimen por Razón de Sexo, Represalias

By: CM

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

2-Agosto-2021

Date

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LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT / GENERAL COUNSEL.

PR 1845 SRF 55176 PackID: 325825 MMLID: 594808-P SVC: MML-PC  
YADIRA RAMOS CRUZ  
LCDA. NORA CRUZ MOLINA  
545 AVE JOSI DE CEDEQO  
ARECIBO PR 00612

0061263924 0009

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Nadira Ramos Cruz

Participant's Address: Curb. Palmeras de Sol calle 7 casa 1-S, Barrio PR 00918

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: Po Box 2795 Arecibo PR. 00613 -2795

Email Address of Counsel: nora-cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: Discrimen por razón de sexo , Represalias

By: [Signature]

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

2-agosto-2021

Date

2021 AUG 17 PM 6:39  
RECEIVED AND FILED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
U.S. SAN JUAN, P.R.

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT / GENERAL COUNSEL.

PR 1845 SRF 55176 PackID: 88490 MMLID: 594807-NP SVC: MML-PC  
Ramos Cruz, Yadira  
Attn: Lcda. Nora Cruz Molina  
P.O. Box 2795  
Arecibo PR 00613-2795

0061362795 8014



Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Neyda Rivera Fernández

Participant's Address: H.C. 3 BOX 3754 Florida, PR 00450

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Onix Molina

Address of Counsel: P.O. Box 2795 Arecibo, P.R. 00413-2795

Email Address of Counsel: nora-onix-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Onix Molina

Print Name

Counsel

Title (if Participant is not an individual)

2<sup>o</sup> agosto -2021

Date

2021 AUG 17 PM 6:39  
RECEIVED AND INDEXED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

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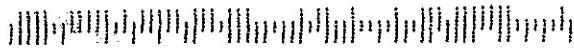
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Grand Central Station  
PO Box 4850  
New York, NY 10163-4850

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LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT / GENERAL COUNSEL.

PR 1845 SRF 55176 PackID: 117033 MMLID: 1421381-P SVC: MML-PC  
RIVERA FELICIANO, NEYDA  
NORA CRUZ MOLINA  
545 AVE JOSI DE CEDEQO  
ARECIBO PR 00612

000612333324 COCO9



Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Neyda Rivera Oteciando

Participant's Address: Hc 03 Box 3756 A Honda, P.R. 00450

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Arecibo, PR 00613-2795

Email Address of Counsel: nora.cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: 

Signature Nora Cruz Molina

Print Name Counsel

Title (if Participant is not an individual) 2-agosto-2021

Date 2-agosto-2021

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RECEIVED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
U.S.  
SAN JUAN, PR  
1271 AUG 17 PM 6:39

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Grand Central Station  
PO Box 4850  
New York, NY 10163-4850

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**LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT/ GENERAL COUNSEL.**

PR 1845 SRF 55176 PACKID: 264896 MMLID: 361121-P SVC: MML-PC  
NEYDA RIVERA FELICIANO  
LCDA. NORA CRUZ MOLINA  
545 AVE JOSÉ DE CEDEÑO  
ARECIBO PR 00612

0061260924 00008



Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Neyda Rivera Tellez

Participant's Address: Hc03 Box 3754 Oficina , P.R. 00450

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795, Arecibo, P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora

Print Name

Counsel

Title (if Participant is not an individual)

5-Agosto-2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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New York, NY 10163-4850

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LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT / GENERAL COUNSEL.

PR 1845 SRF 55176 PackID: 117034 MMLID: 1508371-P SVC: MML-PC  
RIVERA FELICIANO, NEYDA  
PO BOX 2795  
ARECIBO PR 00613-2795

00613-2795 B014



Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Jose Julian Obama Ramo

Participant's Address: P.O Box 2282 Arecibo P.R. 00613

Participant's Email Address: josejulian1143@gmail.com

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O Box 2795 Arecibo P.R. 00613-2795

Email Address of Counsel: nora-cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 2018le4

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

21 Agosto /2021

Date

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Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: José J. Drama Ramos

Participant's Address: P.O. Box 2282 Arecibo P.R. 00613

Participant's Email Address: josyjuian1163@gmail.com

Name of Counsel: Nora Cruz Molina

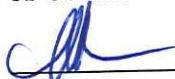
Address of Counsel: P.O. Box 2795 Arecibo, P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: 

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

30/7/2021

Date

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U.S. DISTRICT COURT  
SAN JUAN, PR  
201 AUG 17 PM 6:10

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Prime Clerk LLC  
Grand Central Station  
PO Box 4850  
New York, NY 10163-4850

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PERMIT NO.1450  
TOPPAN MERRILL

LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT / GENERAL COUNSEL.

PR 1845 SRF 55176 PackID: 14677 MMLID: 845703-NP SVC: MML-PC  
ORAMA RAMOS, JOSE J  
NORA CRUZ MOLINA  
ATTORNEY  
DESPACHO LEGAL LCDA. NORA CRUZ MOLINA  
P.O. BOX 2795  
ARECIBO PR 00613-2795

00613-2795 8014

|||||||

hand - 100% + 5%

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any.

Participant's Name:

*José J. Drama Ramos*

Participant's Address:

*P.O Box 2282, Yarcibo P.R. 00413*

Participant's Email Address:

Name of Counsel:

*Nna Chik Molina*

Address of Counsel:

*P.O Box 2795 Arecibo, PR 00413-2795*

Email Address of Counsel: *nna.chik.molina@gmail.com*

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

*24302*

Nature of Claim:

By:

*M*  
Signature

*Nna Chik Molina*

Print Name

*Counsel*

Title (if Participant is not an individual)

*5/Augusto/2021*

Date

RECEIVED AND FILED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
17 AUG 17 PM 6:36

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Obase nn Rivera Nieves

Participant's Address: Plamis maina 301, Edificio 1 Apto 554

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Arecibo, PR. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 15916B

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

S-Augosto-2021

Date

RECEIVED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
101 AUG 17 PM 6:37

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Oscar Mr. Rivera Nieves

Participant's Address: Ramón V. Sáenz, Edificio 1 Apto 554

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Crux Molina

Address of Counsel: P.O. Box 2795 Mercado, P.R. 00913-2795

Email Address of Counsel: nora.crux-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 15916B

Nature of Claim: \_\_\_\_\_

By: (Signature)

Signature

Nora Crux Molina

Print Name

Counsel

Title (if Participant is not an individual)

5-Augusto-2021

Date

2021 AUG 17 PM 6:36  
KUEHN & ASSOCIATES  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Isabel Rosario Jones

Participant's Address: Bariada, Poirorin Datto Sur #151 manati, PR. 00674

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz molina

Address of Counsel: P.O Box 2795 Arecibo PR. 00413-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 1600179

Nature of Claim: Employees Retirement System of the Government

By: [Signature]

Signature

Nora Cruz molina

Print Name

Counsel

Title (if Participant is not an individual)

8-9-2021

Date

RECEIVED AND FILED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
201 AUG 17 PM 6:37

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Violet Santiago Rosario

Participant's Address: HC3 Box 3735 Florida, P.R. 00650

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Arecibo P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 107279

Nature of Claim: \_\_\_\_\_

By: Nora Cruz Molina  
Signature

Print Name

Counsel  
Title (if Participant is not an individual)

5/20/2021  
Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

U.S. DISTRICT COURT  
CLERK'S OFFICE  
SAN JUAN, PR  
2021 AUG 17 PM 6:37

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Vidal Santiago Rosario

Participant's Address: Hc 3 Box 3735 Florida, PR. 00450

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Arecibo, P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 122033

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

2-agosto-2021

Date

2021 AUG 17 PM 6:31  
RECEIVED BY MAIL  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
U.S. SAR JUAN P.R.

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Vidal Santiago Rosario

Participant's Address: Hc3 Box 3735 Florida, D.R. 00450

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: Po. Box 2795 Ponce P.R 00413-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 159710

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature: Nora Cruz Molina

Print Name: Counsel

Title (if Participant is not an individual): 2-Ago-30-2021

Date: 2-Ago-30-2021

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CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
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16:37

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Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Vidal Santiago Rosario  
H-C3 Box 3735 Florida, P.R. 00150

Participant's Address:

Participant's Email Address:

Name of Counsel:

Nora Cruz Molina

Address of Counsel:

P.O. Box 2795 PRECUBO P.R. 00913-2795

Email Address of Counsel:

nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

159156

Nature of Claim:

By:

  
Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

2. Aug 2021

Date

2021 JULY 17 PM 6:37

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CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

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Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Pedro Quiles López

Participant's Address: Institucion Guerrero 30 P.O. Box 3749 Aguadilla PR 00610-0822

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Crux Molina

Address of Counsel: P.O. Box 2795 Arecibo PR 00613-2795

Email Address of Counsel: nora.crux.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 159164

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature: Nora Crux Molina

Print Name: Counsel

Title (if Participant is not an individual): 2-Ago-2021

Date: 2-Ago-2021

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CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
AUG 17 PM 6:37

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Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Pedro Quiles Lopez

Participant's Address: Institucion Guerrero 304 PO Box 3999 Aguadilla PR 00605  
modulo 4B2

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Crux Molina

Address of Counsel: P.O. Box 2795 Areibus P.R. 00913 - 2795

Email Address of Counsel: nora-crux.molina

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 150262

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Crux Molina

Print Name

Counsel

Title (if Participant is not an individual)

2-Agosto-2021

Date

2021 AUG 17 PM 6:37

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CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

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Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Pedro Quiles Lopez

Participant's Address: Institucion Gobernativa 304 P.O. Box 3999 Aguadilla P.R. 00605 modulo  
L-B2

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Arecibo

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature Nora Cruz Molina

Print Name Counsel

Title (if Participant is not an individual)

Date 2-Agosto-2021

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

U.S. DISTRICT COURT  
CLERK'S OFFICE  
SAN JUAN, PR  
AUG 17 PM 6:39

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New York, NY 10163-4850

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PR 1845 SRF 55176 PackID: 73140 MMLID: 416186-P SVC: MML-PC  
Quiles Lopez, Pedro A.  
LCDA. Nora Cruz  
PO Box 2795  
Arecibo PR 00613-2795

0064382795 8018

http://www.hoppl.org/

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Pedro Quiles Lopez

Participant's Address:

Institucion Guerrero 304 P.O Box 3999 Aguadilla P.R. 00605 modulo  
6-B2

Participant's Email Address:

Nora Cruz Molina

Name of Counsel:

P.O BOX 2795 Recibe P.R. 00413 -2795

Address of Counsel:

nora-cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

2021

Nature of Claim:

AUG 17 PM 6:39

By:

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

2-Agosto-2021

Date

REQUEST TO PARTICIPATE  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

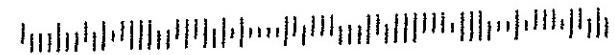
Prime Clerk LLC  
Grand Central Station  
PO Box 4850  
New York, NY 10163-4850

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LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT / GENERAL COUNSEL.

PR 1845 SRF 55176 PackID: 73139 MMLID: 1930968-NP SVC: MML-PC  
Quiles Lopez, Pedro A.  
Attn: Nora Cruz Molina, ESQ  
PO Box 2795  
Arecibo PR 00613-2795

0061332795 B014



Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Pedro Quiles Pérez

Participant's Address:

Institucion Guerrero 304 P.O. Box 3999 Aguadilla P.R. 00605  
Módulo 4-02

Participant's Email Address:

Nora Cruz Molina

Name of Counsel:

P.O. Box 2795 Arecibo, P.R. 00613-2795

Address of Counsel:

nora-cruz.molina@gmail.com

Email Address of Counsel:

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

15916x

Nature of Claim:

By:

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

2-August-2021

Date

201 AUG 17 PM 6:37  
RECEIVED BY MAIL  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

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Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Jorge L Vargas Rodriguez

Participant's Address: Urb. medina Et 1 calle 44 Isabela P.R. 004602

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O Box 2795 Arecibo P.R. 00413-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 159139

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

B-9-2021

Date

2021 AUG 17 PM 6:38

U.S. DISTRICT COURT  
CLERK'S OFFICE  
SAN JUAN, PR

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Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

*Jorge L. Vargas (Rodríguez)*

Participant's Address:

*Urb. medina E4 Calle 4 Isabela, P.R.00446-2*

Participant's Email Address:

Name of Counsel:

*Nora Cruz Molina*

Address of Counsel:

*P.O Box 2795 Arecibo, PR. 00613-2795*

Email Address of Counsel:

*nora.cruz.molina@gmail.com*

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

*159783*

Nature of Claim:

By:

*(Signature)*

*Nora Cruz Molina*

Print Name

*Counsel*

Title (if Participant is not an individual)

*B-9-2021*

Date

2021 AUG 17 PM 6:39

RECEIVED  
U.S. DISTRICT COURT  
U.S. SAN JUAN, PR

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Jorge L. Vargas Rodriguez

Participant's Address: Urb. Medina Esq Calle 41 Isabela PR. 00642

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Caguas, P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: CLM

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

B-9-2021

Date

RECEIVED AND FILED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
2021 AUG 17 PM 6:36

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Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Yolanda Taffaneli Rodriguez

Participant's Address: \_\_\_\_\_

Participant's Email Address: Nora Crux molina

Name of Counsel: P.O. Box 2795 Arcadio P.R. 00413-2795

Address of Counsel: nora-crux-molina@gmail.com

Email Address of Counsel: 73155

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 73155

Nature of Claim: \_\_\_\_\_

By: Nora Crux molina

Signature

Nora Crux molina

Print Name

Counsel

Title (if Participant is not an individual)

8-9-2021

Date

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RECEIVED AND FILED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
2021 AUG 17 PM 6:36

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Edwin Diaz Maldonado

Participant's Address: Hc 1 Box 2414 Bayamon PR 00641

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Arecibo, P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: \_\_\_\_\_

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature \_\_\_\_\_

Nora Cruz Molina

Print Name \_\_\_\_\_

Counsel

Title (if Participant is not an individual) \_\_\_\_\_

8-5-2021

Date \_\_\_\_\_

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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LEGAL NOTICE ENCLOSED. DIRECT TO ATTENTION OF ADDRESSEE OR PRESIDENT / GENERAL COUNSEL.

PR 1845 SRF 55176 PackID: 151823 MMLID: 1419040-P SVC: MML-PC  
COLON MALDONADO, EDWIN  
NORA CRUZ MOLINA  
PO BOX 2795  
ARECIBO PR 00613-2795

0061382795 8019

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Edwin Colón Maldonado

Participant's Address: Hacienda Box 24144 Bajadero P.R. 00613

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O. Box 2795 Díaz, PR 00613-2795

Email Address of Counsel: nora.cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 044PUL

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

0-5-2021

Date

RECEIVED  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
2021 AUG 17 PM 6:38

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Edwin Diaz Maldonado

Participant's Address: HC-1 Box 2411 Jagüero P.R. 00616

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Maldonado

Address of Counsel: P.O Box 2795 Arcadio, P.R. 00613-2795

Email Address of Counsel: nora.cruz.maldonado@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 838843

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature

Nora Cruz Maldonado

Print Name

Counsel

Title (if Participant is not an individual)

5/Agosto/2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: César Jiménez Maldonado

Participant's Address: P.O. Box 4464 Sabana Hoyos, P.R. 00488

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Crux Molina

Address of Counsel: P.O. Box 2795 Arroyo, PR 00413-2795

Email Address of Counsel: nora-crux.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 159107

Nature of Claim: \_\_\_\_\_

By: 

Signature

Nora Crux Molina

Print Name

Counsel

Title (if Participant is not an individual)

8-9-2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

2021 AUG 17 PM 6:38

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Carlo D. Vazquez Cruz

Participant's Address:

Hato Box 12155 Bo-Yeguado Camuy, PR 00627

Participant's Email Address:

nora.cruz.molina

Name of Counsel:

nora.cruz.molina

Address of Counsel:

P.O. Box 2795 Arecibo P.R. 00413-2795

Email Address of Counsel:

nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

151374

Nature of Claim:

By:

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

09-2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Juan Rodriguez Perez

Participant's Address: P.O. Box 793 Guanica Hoyos P.R. 00488

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: Po Box 2795 Arecibo P.R. 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: B6B35

Nature of Claim: \_\_\_\_\_

By: Cruz

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

8-19/2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

U.S. DISTRICT COURT  
SAN JUAN, PR  
2018 AUG 17 PM 6:38

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

*Esterban Casteriana Ponce*

Participant's Address:

*Po Box 717 Hatillo, PR 00659 -0717*

Participant's Email Address:

Name of Counsel:

*Nora Crux Molina*

Address of Counsel:

*Po Box 2795 Arecibo PR 00613-2795*

Email Address of Counsel: *nora crux. molina@gmail.com*

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

*1171946*

Nature of Claim:

By:

*Nora Crux Molina*  
Signature

Print Name

*Counsel*

Title (if Participant is not an individual)

*0-9-2021*

Date

2021 AUG 17 PM 6:39  
FEDERAL DISTRICT COURT  
CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Vickie Aquila Geiring

Participant's Address: P.O Box 2 Ganachas, PR 00652

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Cruz Molina

Address of Counsel: P.O Box 2795 Arecibo, PR 00613-2795

Email Address of Counsel: nora.cruz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 83123

Nature of Claim: \_\_\_\_\_

By: [Signature]

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

5 Agosto 2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

2021 AUG 17 PM 6:31  
U.S. DISTRICT COURT  
CLERK'S OFFICE  
SAN JUAN, PR

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Vickie Aguilera Geiring

Participant's Address:

P.O. Box 2 Capanchales, P.R. 00452

Participant's Email Address:

Nora Crux Molina

Name of Counsel:

P.O. Box 2795 Dededo P.R. 00613-2795

Address of Counsel:

Email Address of Counsel:

nora.crux.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

70430

Nature of Claim:

By:

Signature

Nora Crux. Molina

Print Name

Crusel

Title (if Participant is not an individual)

5/Agosto/2021

Date

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CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, PR  
2021 AUG 17 PM 6:37

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Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Angel Burgos Jones

Participant's Address:

HCO2 Box 7130 Orocovis P.R. 00720

Participant's Email Address:

Name of Counsel:

Nora Cruz Molina

Address of Counsel:

P.O Box 2795 Arecibo P.R. 00613-2795

Email Address of Counsel:

nora-cruz-molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

152802

Nature of Claim:

By: [Signature]

Signature

Nora Cruz Molina

Print Name

Counsel

Title (if Participant is not an individual)

8-9-2021

Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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CLERK'S OFFICE  
U.S. DISTRICT COURT  
SAN JUAN, P.R.  
17 AUG 17 PM 2021

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: William Marrero Ramirez

Participant's Address: HCO2 Box 4087, Florida P.R. 00450

Participant's Email Address: \_\_\_\_\_

Name of Counsel: Nora Diaz Molina

Address of Counsel: P.O. Box 2795 Arecibo P.R. 00413-2795

Email Address of Counsel: nora.diaz.molina@gmail.com

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 137247

Nature of Claim: \_\_\_\_\_

By: [Signature]

Signature: Nora Diaz Molina

Print Name: Counsel

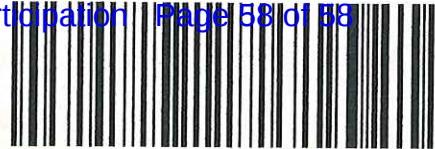
Title (if Participant is not an individual): 0-9-2021

Date: 0-9-2021

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